

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Human Rights Campaign Equality Votes		FEC IDENTIFICATION NUMBER ▼ C C00508440	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 10 / 05 / 2016</div>	

Full Name of Payee Human Rights Campaign			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2016		
Mailing Address 1640 Rhode Island Ave NW			Amount 442.26 Transaction ID : D632014 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016		
City Washington	State DC	Zip Code 20036			
Purpose of Expenditure Online advocacy - staff time		Category/Type	Name of Federal Candidate Clinton, Hillary, Rodham, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate Clinton, Hillary, Rodham, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">MM / DD / YYYY 52248.99</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Human Rights Campaign			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 18 / 2016		
Mailing Address 1640 Rhode Island Ave NW			Amount 1769.04 Transaction ID : D632015 Date of Disbursement or Obligation MM / DD / YYYY 08 / 18 / 2016		
City Washington	State DC	Zip Code 20036			
Purpose of Expenditure Online advocacy - staff time		Category/Type	Name of Federal Candidate Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">MM / DD / YYYY 52248.99</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">2211.30</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rinefierd, James, , Mr.,

[Electronically Filed]

Date

 MM / DD / YYYY
 10 / 10 / 2016

Signature